

09966574

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)							SERIAL NO. 1	FILING DATE
							APPLICANT(S) 3966574	
819104 CLAIMS								
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			
	IND.	DEP.	IND.	DEP.	IND.	DEP.		
1							51	
2							52	
3							53	
4							54	
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42							92	
43							93	
44							94	
45							95	
46							96	
47							97	
48							98	
49							99	
50							100	
TOTAL IND.	9		9		9		TOTAL IND.	
TOTAL DEP.	72		15		28		TOTAL DEP.	
TOTAL CLAIMS	81		24		37		TOTAL CLAIMS	

\* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENTS

FORM PTO-1360 (REV. 3-78)

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